

**CHEVERLY POLICE DEPARTMENT**  
**6401 FOREST ROAD**  
**CHEVERLY, MD 20785**

**APPLICATION FOR EMPLOYMENT**  
(Sensitive Civilian Positions Only)



Applicant's Name: \_\_\_\_\_  
(Last, First, Middle, Suffix)

Official Use Only	
Date Received:	_____
Received By:	_____

INFORMATION COLLECTED IN THIS BOOKLET WILL BE USED FOR  
INVESTIGATIVE PURPOSES ONLY

Dear Police Applicant:

The Cheverly Police Department is seeking men and women that exhibit the characteristics of sound judgment, honesty, reliability, integrity, and the ability to blend the philosophy of community-oriented policing with a desire to best serve the interests of the citizens of the Town of Cheverly. The typical duties of a police officer include: enforcing the criminal and traffic laws of the State of Maryland, Prince George's County, and the Code of the Town of Cheverly, problem solving, report writing, courtroom presentation, and providing effective service to citizens. In exchange for these duties, police officers are offered a competitive salary and excellent benefits. Shift work is required of all department employees.

Persons currently certified by the Maryland Police and Correctional Training Commission (MPCTC and/or MPTSC) are preferred. In addition, minority, female, and bi-lingual (English/Spanish) persons are strongly encouraged to apply. Application should be obtained from and returned to the Cheverly Police Department, 6401 Forest Road, Cheverly, Maryland 20785. **The Town of Cheverly is an Equal Opportunity Employer without regard to race, color, religion, national origin, sex, ancestry, marital status, age, sexual orientation, disability, political or union affiliation.**

### Minimum Qualifications

- U.S. Citizen
- High School Graduate
- 21 Years of Age at Certification
- Possess a Valid Driver's License

### Selection Process

- Completion and Submission of an Application
- Oral Board Interview
- Completion and Submission of a Personal History Statement
- Conditional Offer of Employment
- Background Investigation
- Drug Screening
- Final Offer of Employment

Reasons for disqualification from the employment process may include (but are not limited to) the following: poor work history; poor driving record; felony conviction; illegal drug usage, including the purchase, sale, or distribution of drugs; falsification of employment documents; inability to complete any of the components of the background process; and/or any other disqualifying factor as determined by the Chief of Police.

**Applicant's should be encouraged to ask questions if they have them, either during the interview or after the interview due to the realization that not everyone has applied for a position within a criminal justice agency or if they have, the other agency was not as thorough/in-depth as this agency.**

**If you cannot follow instructions during the application process, we cannot expect you to follow instructions as an employee of the police department.**

**If there is anything questionable in your background, it is in your best interest to discuss it with your background investigator at the earliest possible convenience. If your background investigator learns of questionable situations on his/her own, it could be interpreted as your failure to disclose information and ultimately result in you being disqualified from the selection process.**

**Be sure that you have the Authorization for release of information at the end of the application notarized. This is your responsibility; and not that of the Police Department. Failure to submit a notarized authorization for release of information is grounds for removal from the selection process.**

### **Application Instructions**

- **DO NOT** allow another person to write or type in this application. Doing so may result in disqualification. The applicant, using black ink only, must neatly print or type all information in **BLACK** ink.
- Read each question carefully before answering.
- Applications that are incomplete or illegible will not be processed.
- It is mandatory that every question on the application be answered. In the event that a question does not apply to you answer it by indicating "N/A" (Not Applicable).
- If you feel that contacting your current employer would create a problem, note it in the "Current Employer" section and an investigator will schedule an appropriate time to do so.
- **ANY FALSE STATEMENTS OR OMISSIONS** of any information on any document or during any interview, including phone interviews is cause for immediate disqualification or termination if appointment has already been offered or accepted.
- If there is any documentation concerning an event in your background, bring the original copies to your initial interview. This includes expungement papers to include a compliance letter from each party listed on the expungement order. If you were charged or convicted of a crime or appeared in court regarding a criminal offense, you must bring the court documents containing the final disposition. Contact the court where you appeared to obtain these documents.

**I have read, and agree to, the above statement/instructions** \_\_\_\_\_  
(Signature)

**SECTION I:****PERSONAL DATA**

Full Name: \_\_\_\_\_

Aliases: \_\_\_\_\_

Residence Address: \_\_\_\_\_

\_\_\_\_\_

Mailing Address (If Different From Listed Above) \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Work Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Driver's License Number	Class	Restriction Codes	State	Expiration Date

Height	Weight	Hair	Eyes	Sex	Race

Date of Birth \_\_\_\_\_ Current Age \_\_\_\_\_

Place of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

Citizenship: \_\_\_\_\_ U.S. \_\_\_\_\_ Alien \_\_\_\_\_ By Birth \_\_\_\_\_ Naturalized

If Not a U.S. citizen enter the date you first entered the United States: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Year

Immigration Status: \_\_\_\_\_ or if nationalized:

Naturalization Certificate number: \_\_\_\_\_ Date of Certificate: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Mth Day Year

List all foreign languages and check the box indicating your fluency.

Language	Excellent	Good	Fair

**SECTION II:****ARREST/CONVICTION DATA****Have you ever been:**

Arrested \_\_\_\_Yes \_\_\_\_No      Detained \_\_\_\_Yes \_\_\_\_No

Convicted of any offense: \_\_\_\_Yes \_\_\_\_No

Charged by any law enforcement agency: \_\_\_\_Yes \_\_\_\_No

Fined, in connection with any conviction: \_\_\_\_Yes \_\_\_\_No

Placed on Parole or Probation: \_\_\_\_Yes \_\_\_\_No

Subject to forfeiture of collateral: \_\_\_\_Yes \_\_\_\_No

Required to appear in Juvenile Court for any act that would have been  
a crime if committed by an adult: \_\_\_\_Yes \_\_\_\_No

Served with a summons to appear in court as a defendant or a witness? \_\_\_\_Yes \_\_\_\_No

Have you ever received a probation before judgment for a criminal, or traffic offense?  
\_\_\_\_Yes \_\_\_\_No

**Are you now:**

Charged by any law enforcement agency: \_\_\_\_Yes \_\_\_\_No

Released on bail, personal recognizance or other conditional release: \_\_\_\_Yes \_\_\_\_No

On Parole or Probation of any type: \_\_\_\_Yes \_\_\_\_No

Are you now, or have you ever been, involved as either a plaintiff or defendant  
in any civil court action: \_\_\_\_Yes \_\_\_\_No

If you answered "Yes" to any of the above questions, explain below. Give the date of incident, location, law enforcement agency, any charges, and final disposition of the charges. Use additional paper if necessary.

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### SECTION III: ILLEGAL DRUG USE AND SALES

Complete the chart below with respect to any use you have had with illegal drugs or any illegal use of any legal drugs.

Drug	Date first used	Date last used.	Number of times used
Marijuana			
Hashish			
PCP			
Angel Dust			
THC			
LSD			
Peyote			
Mescaline			
Mushrooms			
Psilocybin			
Heroin			
Cocaine			
Quaaludes			
Uppers			
Downers			
Tranquilizers			
Amphetamines			
Biphetamines			
Ecstasy "E"			
Preludin			
Dilaudid			
Talwin & PBZ			
Speed			
Inhalants			
Methamphetamine			
Opium			
Steroids			
Others			

Have you ever taken any medication other than with a doctor's prescription? \_\_\_\_ Yes \_\_\_\_ No

Have you ever sold any illegal drugs or legally prescribed drugs? \_\_\_\_ Yes \_\_\_\_ No

If so, list the type of drug, the amount of times sold and the date last sold.

Type of drug	Number of times sold	Date last sold

When was the last time you were in the presence of an illegal drug? \_\_\_\_\_

**TOWN OF CHEVERLY  
POLICE DEPARTMENT**

**AUTHORIZATION FOR RELEASE OF INFORMATION  
AND STATEMENT OF CONSENT**

I, \_\_\_\_\_ do hereby authorize a review by, and full disclosure to H. Robshaw #1601, Chief of Police, or a duly authorized agent of the Cheverly Police Department of all records, or any part thereof, concerning myself, whether the said records are public or private, and including those which may be deemed to be privileged or of a confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions, financial and credit institutions, including records and any other information including statements of deposits, withdrawals and balances of checking, savings and loan accounts, and also the record of commercial or retail mercantile establishments and retail credit agencies (including credit reports and/or ratings,) medical and psychiatric consultation and/or treatment including those of hospitals, clinics, private practitioners, the U.S. Veterans Administration, Social Security Administration, and military medical and psychiatric facilities, public utility companies, medical reports, the results of polygraph examinations, efficiency and performance ratings, complaints or grievances filed by or against me, and salary records, and other financial statements and records of any nature whatever, and wherever filed, records of complaints, arrests, trial and/or convictions for alleged or actual violations of the law, including criminal and/or traffic records, and further to include all such records whether "adult" or "juvenile."

I fully consent, after a conditional offer of employment is made, to any physical, psychological, or other testing, including urine and/or blood for controlled dangerous substances, to determine my suitability to be employed by the Cheverly Police Department prior to beginning employment and during the entire course of my employment with the Cheverly Police Department.

I also fully consent to submit to a polygraph examination and/or computer voice stress analyzer for verification of information given by me or contained in my records, application, and/or interview about my application for employment with the Cheverly Police Department. I hereby release, and waive, any, and all, rights, which may be given to me by any Federal, State, County, or municipality law to refuse or decline to undertake a polygraph examination and/or computer voice stress analyzer.

I reiterate, and emphasize that the intent of this authorization is to provide full and free access to those records and any other information including statements that will permit the development of a background and history of my personal and professional life. I further reiterate my authorization to submit, after a conditional offer of employment is made, to any medical,

physical, psychiatric, psychological, or other testing, including urine and/or blood for controlled dangerous substances for the specific purpose of developing pertinent information for the Cheverly Police Department to consider in determining my suitability for employment by the Department. It is my specific intent to provide access to information, however personal, privileged, or confidential it may appear to be, and the sources of information specifically enumerated above are not intended to deny or prevent access to any other records not specifically identified herein.

I understand that any information obtained by a personal history background investigation, which is developed, directly or indirectly, in whole or in part, upon release will be considered in determining my suitability for employment, as stated above. Any medical information obtained before a conditional offer of employment is made will not be considered unless a conditional offer of employment is extended. All medical information received will be kept in a separate file and will not be reviewed or used in determining whether a conditional offer of employment will be made.

I agree to indemnify and hold harmless the person(s) to whom this Authorization for Release of Information is presented and his/her agents and employees, from and against all claims, damages, losses, and expenses, including reasonable attorneys' fees arising out of, or by reason for complying with requests for information that this Authorization provides.

I further understand that in the event my employment application and/or resume is disapproved, not considered, or otherwise does not result in my appointment to the Cheverly Police Department, the source(s) of confidential information cannot and will not be released and/or revealed to me. Additionally, all information and documentation obtained, to include testing results, will be the sole property of the Cheverly Police Department.

It is further understood by me that a photocopy, including a facsimile (or fax) copy of the actual original of this Authorization for Release of Information will be valid as an original hereof, even though the said photocopy or facsimile does not contain an original writing of my signature.

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APPLICANT'S SIGNATURE / PRINTED NAME	DATE
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DATE OF BIRTH	NOTARY SIGNATURE	-	SEAL
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SOCIAL SECURITY NUMBER	MY COMMISSION EXPIRES
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